TELEPHONE (212) 258 In re appl

SCHIFF HARDIN LLP

PATENT DEPARTMENT 6600 SEARS TOWER 233 SOUTH WACKER DRIVE CHICAGO, ILLINOIS 60606

KER HOHMANN, et al.

CONFIRMATION NO.: 2054

Serial No .:

10/086,289

GROUP ART UNIT: 2644

Filed:

March 1, 2002

DOCKET NO.: P02,0077

For:

METHOD FOR THE OPERATION OF A HEARING AID DEVICE OR HEARING DEVICE SYSTEM AS

WELL AS HEARING AID DEVICE OR HEARING DEVICE SYSTEM

AMENDMENT "A"

Mail Stop Amendment Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

I

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below.

			CLAIMS AS AMEND	ED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAI FEE
TOTAL CLAIMS		MINUS		х	() X 25.00 () X 50.00	
INDEP. CLAIMS		MINUS		х	() X 100.00 () X 200.00	_
Application amended to contain any multiple dependent claims (') YES not previously paid for.					()\$180.00 ()\$360.00 ONE TIME	
			TOTAL ADDITIONAL FOR THIS AMENDM			\$0.0

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

**	If the "Highest	: Number Previously	Paid For" IN	N THIS SPACE is less than 20 write "2	.0" in this space.

П	A check	in the	amount of \$	is	attached.

T a	heck for \$ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached. Director is hereby authorized to charge any additional fees which may be required, or to credit any overpaymount No. 501519. A duplicate of this sheet is enclosed. en phoning re this application, please call (312) 258-5500.
	SCHIFF HARDIN LLP (Customer Number: 26574)
	BY Manh Bergrer (45,877)
herel nvelo	certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an e addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on
	Mark Bergner
	NAME OF APPLICANT'S ATTORNEY
	SIGNATURE
	March 15, 2005
	DATE

Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated November 15, 2004 for One month(s) so that the period for response is extended to March 15, 2005. A check in the amount of \$120.00 is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

A check for \$ ____ accompanying IDS under 37 CFR 1.97(c) is attached

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